



Mental Health Triage Personnel Grant

Process Information Report

Date of Report:

3/31/15

County Name:

Orange

Name of Contact:

Linda Molina

Phone Number:

714-834-5572

Email:

lmolina@ochca.com

1. Total number of Triage Personnel Hired to Date

(Identify in Full-time Equivalents FTEs)

a. County Staff Total

0

FTEs

b. Contract Staff Total

0

FTEs

2. Total Number for each type of Personnel Hired

(Identify in Full-time Equivalents FTEs. If the staff hired do not fit the categories below- please specify in the "other" category)

a. County Staff

i. Case Managers

0

FTEs

ii. Social Workers

0

FTEs

iii. Nurses

0

FTEs

iv. Clinicians

0

FTEs

| | | |
|--------------------------------|--------------------------------|------|
| v. Mental Health Workers | <input type="text" value="0"/> | FTEs |
| vi. Peer Providers | <input type="text" value="0"/> | FTEs |
| vii. Outreach Workers | <input type="text" value="0"/> | FTEs |
| viii. Psychiatrists | <input type="text" value="0"/> | FTEs |
| ix. Other | | |
| <input type="text" value="0"/> | <input type="text"/> | FTEs |
| <input type="text"/> | <input type="text"/> | FTEs |
| <input type="text"/> | <input type="text"/> | FTEs |
| <input type="text"/> | <input type="text"/> | FTEs |
| <input type="text"/> | <input type="text"/> | FTEs |

b. Contract Staff

| | | |
|--------------------------------|--------------------------------|------|
| i. Case Managers | <input type="text" value="0"/> | FTEs |
| ii. Social Workers | <input type="text" value="0"/> | FTEs |
| iii. Nurses | <input type="text" value="0"/> | FTEs |
| iv. Clinicians | <input type="text" value="0"/> | FTEs |
| v. Mental Health Workers | <input type="text" value="0"/> | FTEs |
| vi. Peer Providers | <input type="text" value="0"/> | FTEs |
| vii. Outreach Workers | <input type="text" value="0"/> | FTEs |
| viii. Psychiatrists | <input type="text" value="0"/> | FTEs |
| ix. Other | | |
| <input type="text" value="0"/> | <input type="text"/> | FTEs |

| | | |
|--|--|------|
| | | FTEs |
| | | FTEs |
| | | FTEs |
| | | FTEs |

**3. Identify Triage Locations for Service and Points of Access
Currently Available with Staff Already Hired**
(i.e hospital emergency rooms, homeless shelters, mobile team, etc.)

| | |
|---|--|
| 0 | |
| | |
| | |

4. Comments

All services will be contracted out. All four solicitations are in active development and/or in contract negotiation.

If you have questions, contact Cody Scott.

Email: Cody.Scott@mhsoac.ca.gov

Phone Number: (916) 445-8692

Please Email this document to:
mhsoac@mhsoac.ca.gov